

## Council

- Linda Johnson, Interim Chair, Community Representative
- Larry Kogovsek, Vice Chair, Community Representative
- Rhonda Abbott Consumer Representative
- Michael Baker Jefferson County Health Department
- Mayra Benitez Consumer Representative
- Jolene Greene Consumer Representative
- Elaine Knobbs-Seasholtz Mosaic Medical
- Lauren Kustudick Consumer Representative
- Tom Kuhn Deschutes County
- Jennifer Little Klamath County
- Tre Madden Consumer Representative
- Brad Porterfield Consumer Representative Latino Community Association
- Elizabeth Schmitt Consumer Representative
- Mandee Seeley Consumer Representative
- Ken Wilhelm United Way
- Cris Woodard Community Representative
- Vicky Ryan Crook County Health Department



August 20, 2020

**VIRTUAL**

<https://us02web.zoom.us/j/86103550703?pwd=enBXamUrY3VvdnFhdjR5SVR4Q1FFQjT09>

Conference Line: 1.346.248.7799

Meeting ID: 861.0355.0703#

Passcode: 492445#

- |             |   |
|-------------|---|
| 5:30 – 5:40 | Welcome— <b>Linda Johnson</b> <ul style="list-style-type: none"><li>• Public Comment</li><li>• Approval of Meeting Minutes</li><li>• Annoucements</li></ul>             |
| 5:40 – 6:20 | Community Health Projects Grant— <b>MaCayla Arsenault &amp; Gwen Jones</b> <ul style="list-style-type: none"><li>• Scorecard</li><li>• Process &amp; Timeline</li></ul> |
| 6:20 – 6:35 | COHC Board of Directors Strategic Plan— <b>Donna Mills</b>  |
| 6:35 – 6:50 | Traditional Health Workers— <b>Tanya Nason</b>  |
| 6:50 – 7:00 | Community Hot Topics— <b>Linda Johnson</b> <ul style="list-style-type: none"><li>• COVID-19 Community Needs &amp; Impact</li></ul>                                      |

### Five Finger Voting:

0: No go! Serious concerns

1: Serious reservations and prefer to resolve concerns before supporting it

2: Some concerns, but will go along with it

3: Support the idea

4: Strong support, but will not champion it

5: Absolutely, best idea ever, willing to champion it

*“The overarching purpose of the CAC is to ensure the COHC remains responsive to consumer and community health needs.”—COHC CAC Charter*

The Central Oregon Health Council encourages persons with disabilities to participate in all programs and activities. This event/location is accessible to people with disabilities. If you need accommodations to make participation possible please call (541) 306-3523 or email [macayla.arsenault@cohealthcouncil.org](mailto:macayla.arsenault@cohealthcouncil.org)

**Community Advisory Council**  
**2020 Community Health Projects**  
**Application Scorecard**

**Grant Information:**

2020 Community Health Project Grants are available for \$5,000 to \$50,000 to address Social Determinants of Health and Equity. These are community-level interventions focused on improving community health and wellbeing and reducing health disparities. The total award pool is \$252,249.03

**Project Requirements**

Applications must meet the criteria below:

- Projects must address Social Determinants of Health and Equity (SDOH-E).
- Projects must align with at least one of the six focus areas (listed below) in the 2020-2023 Regional Health Improvement Plan (RHIP) Aims/Goals (review full plan and executive summary at [cohealthcouncil.org/rhip/](http://cohealthcouncil.org/rhip/)).
  1. Address Poverty and Enhance Self-Sufficiency
  2. Behavioral Health Access and Coordination
  3. Promote 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
- Projects must take place within Central Oregon. Areas include:
  - Crook County
  - Deschutes County
  - Jefferson County
  - The Confederated Tribes of Warm Springs
  - Northern Klamath County, limited to:
    - Gilchrist
    - Chemult
    - Crescent
    - Crescent Lake Junction
- Applicant can be non-profit or for-profit organizations.

**Restrictions**

Community Health Projects grants cannot be used for:

- Any product or service that can be billed to any health insurance plan (durable medical equipment, screenings, medicines, etc.)
- Rental assistance, housing assistance, housing construction, or utilities
- Projects benefiting a single individual or single household
- Projects that don't address Social Determinants of Health and Health Equity
- Projects *only* serving undocumented community members

**Key Definitions:**

**Social Determinants of Health:**

Social determinants of health are conditions in the environments in which people are born, live, learn, work, play, worship, and age that affect a wide range of health, functioning, and quality-of-life outcomes and risks.

Examples of *social determinants* include:

- Availability of resources to meet daily needs (e.g., safe housing and local food markets)
- Access to educational, economic, and job opportunities
- Access to health care services
- Quality of education and job training
- Availability of community-based resources in support of community living and opportunities for recreational and leisure-time activities
- Transportation options
- Public safety
- Social support
- Social norms and attitudes (e.g., discrimination, racism, and distrust of government)
- Exposure to crime, violence, and social disorder (e.g., presence of trash and lack of cooperation in a community)
- Socioeconomic conditions (e.g., concentrated poverty and the stressful conditions that accompany it)
- Residential segregation
- Language/Literacy
- Access to mass media and emerging technologies (e.g., cell phones, the Internet, and social media)
- Natural environment, such as green space (e.g., trees and grass) or weather (e.g., climate change)
- Built environment, such as buildings, sidewalks, bike lanes, and roads
- Worksites, schools, and recreational settings
- Housing and community design
- Exposure to toxic substances and other physical hazards
- Physical barriers, especially for people with disabilities
- Aesthetic elements (e.g., good lighting, trees, and benches)

Source: <https://www.healthypeople.gov/2020/topics-objectives/topic/social-determinants-of-health>

### **Health Equity:**

“Health equity means that everyone has a fair and just opportunity to be as healthy as possible. This requires removing obstacles to health such as poverty, discrimination, and their consequences, including powerlessness and lack of access to good jobs with fair pay, quality education and housing, safe environments, and health care.”

Source: <https://www.rwjf.org/en/library/research/2017/05/what-is-health-equity-.html>

### **Health Disparities:**

“A particular type of health difference that is closely linked with social, economic, and/or environmental disadvantage. Health disparities adversely affect groups of people who have systematically experienced greater obstacles to health based on their racial or ethnic group; religion; socioeconomic status; gender; age; mental health; cognitive, sensory, or physical disability; sexual orientation or gender identity; geographic location; or other characteristics historically linked to discrimination or exclusion.”

Source: <https://www.healthypeople.gov/2020/about/foundation-health-measures/Disparities>

## 2020 Community Health Projects Scoring Form

Please read the Community Health Projects application and use the scorecard below.

1. Read the criteria for each category. Then refer to the parts of the application indicated to build your score. Enter your score in the last column.
2. Once you have provided a score in each category, add up your points and provide your total score at the bottom of the page.

Project Name \_\_\_\_\_ Reviewer \_\_\_\_\_

<b>Application Part Two</b>	UNSATISFACTORY <b>0</b>	SOME DEFICIENCIES EVIDENT <b>1</b>	SATISFACTORY <b>3</b>	EXCEPTIONAL <b>5</b>	INSERT SCORE
<b>Project addresses Social Determinants of Health</b>	Unclear explanation of how the project addresses Social Determinants of Health	Very limited or minimal explanation of how the project addressing Social Determinants of Health	Adequately addresses Social Determinants of Health	Exceeds our expectations of addressing Social Determinants of Health	
<b>Project reduces health disparities</b>	Unclear explanation of how the project reduces health disparities	Very limited or minimal explanation of how the project reduces health disparities	Project adequately reduces health disparities	Exceeds expectations of reducing health disparities	
<b>Project addresses barriers to access, participation, and inclusion for individuals served by the project</b>	Unclear explanation of how the project addresses barriers to access participation, and inclusion for individuals served by the project	Very limited or minimal explanation of how the project addresses barriers to access participation, and inclusion for individuals served by the project	Project adequately addresses barriers to access participation, and inclusion for individuals served by the project	Exceeds expectations of addressing barriers to access participation, and inclusion for individuals served by the project	
<b>Application Part Three</b>	UNSATISFACTORY <b>0</b>	SOME DEFICIENCIES EVIDENT <b>1</b>	SATISFACTORY <b>3</b>	EXCEPTIONAL <b>5</b>	INSERT SCORE
<b>Explanation of project description</b>	Project description is unclear.	Minimal explanation of project	Clear description of project.	More than adequate explanation of project.	
<b>Explanation of project necessity</b>	Unclear explanation of why this project is needed.	Minimal explanation of why this project is needed	Sufficient explanation of why this project is needed.	More than sufficient explanation of why this project is needed.	
<b>Application Part Six</b>	UNSATISFACTORY <b>0</b>	SOME DEFICIENCIES EVIDENT <b>1</b>	SATISFACTORY <b>3</b>	EXCEPTIONAL <b>5</b>	INSERT SCORE
<b>Project budget</b>	Budget is unrealistic, incomplete/unclear, or extravagant	Budget is plausible, moderately efficient, and focus on relatively important line items	Budget is realistic, clear, and uses resources wisely	Budget is an exceptional use of resources and uses resources wisely.	

**Total** \_\_\_\_\_

# 2020 Central Oregon Community Health Projects



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## Central Oregon Health Council

### ***Part One: Project Highlights***

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#### **Project Name\***

Name of Project.

*Character Limit: 100*

#### **Amount Requested (Between \$5,000 to \$50,000)\***

Please list the total amount of funds requested for this project.

**The funding request needs to be between \$5,000 to \$50,000.**

Anything over \$50,000 or under \$5,000 will be denied.

*Character Limit: 20*

#### **Project Duration\***

How long will your project last? (Please tell us in months or years)

*Character Limit: 25*

#### **Counties or Tribal Area Included in Project\***

Which of the following counties and/or tribal area will your project include?

##### **Choices**

Confederated Tribes of Warm Springs

Crook

Deschutes

Jefferson

Northern Klamath

#### **Name of Project Lead\***

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

*Character Limit: 50*

**Email for Project Lead\***

Please provide an email address for the project lead.

*Character Limit: 254*

**Phone Number of Project Lead\***

Please provide the best phone number to reach the project lead.

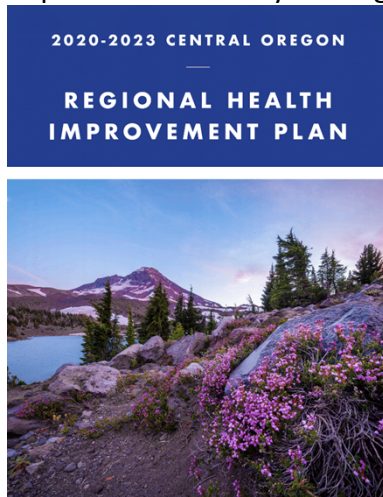
*Character Limit: 25*

## ***Part Two: Project Checklist***

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**2020-2023 Regional Health Improvement Plan Priority Areas\***

Please review the aim for each of the six priority areas for the 2020-2023 Regional Health Improvement Plan by clicking on the image:



Based on the aim of each priority area, please select which area(s) of focus your project aligns with:

**Choices**

Address Poverty and Enhance Self-Sufficiency  
Behavioral Health: Increase Assess and Coordination  
Promote Enhanced Physical Health Across Communities  
Stable Housing and Supports  
Substance and Alcohol Misuse: Prevention and Treatment  
Upstream Prevention: Promotion of Individual Well-Being

**Alignment With the Regional Health Improvement Plan\***

Based on the priority area(s) you selected above, share how your project aligns with the aim(s).

*Character Limit: 3300*

### Oregon Health Plan (OHP)\*

Will your community project be available to and serve individuals who qualify for the Oregon Health Plan (OHP)?

#### Choices

Yes

No

Unsure

### Social Determinants of Health\*

How does your project address **social determinants of health**?

*Character Limit: 3300*

### Social Determinants of Health (Continued)\*

Please select which social determinant(s) of health your project will primarily address:

#### Choices

Economic Stability

Neighborhood and Built Environment

Education

Social and Community Health

Health and Health Care

### Equity\*

How will this project reduce health disparities?

*Character Limit: 3300*

### Equity (Continued)\*

Describe the strategies you'll use to address specific barriers to access, participation, and inclusion for the people served by this project.

*Character Limit: 3300*

## Part Three: Project Details

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### Timeline - Project Start Date\*

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

*Character Limit: 10*

### Timeline - Project End Date\*

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

*Character Limit: 10*

### Project Aim\*

Please describe the overarching aim of this project. (An aim is the large (thinking big) desired result of your project. The aim serves as the foundation for developing your program objectives. Please limit the aim to one sentence.)

*Character Limit: 250*

### Project Description/Overview\*

Please describe your project.

*Character Limit: 5000*

### Why is this project needed?\*

Please describe the identified need for this project.

*Character Limit: 3300*

## Part Four: Project Objectives

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Each project is required to contain strong measurable objectives.

Objectives are statements describing the results to be achieved, and how they will be achieved. Multiple objectives are needed to measure different parts of a project.

Each target for the objective must be written in SMART format (Specific, Measurable, Attainable, Relevant, and Time-bound).

**For each objective in your project, please provide a numerical target, the date that you expect to achieve this target, as well as any available baseline data to indicate where you are starting.**

**Please contact the Central Oregon Health Council if your project contains more than six objectives.**

#### **For example:**

- Objective Description: Increase fruit and vegetable intake.
- SMART Objective (Target/Future State): Between July 2020, and June 2021, ABC organization will provide weekly fruit/vegetable boxes to 100 income-eligible families in Central Oregon.
- Baseline data (Current State): 25 income-eligible families receive weekly fruit/vegetable boxes.



**Objective Description #1\***

What is trying to be accomplished?

*Character Limit: 500*

**SMART Objective #1 (Target/Future State)\***

*Please include a numerical target whenever possible, and the date that you expect to hit the target (see example above).*

*Character Limit: 250*

**Baseline Data for Objective #1 (Current State)\***

*Please provide information that indicates where you are starting (current state data) as it relates to your SMART Objective.*

*Character Limit: 500*

**Objective Description #2\***

What is trying to be accomplished?

*Character Limit: 500*

**SMART Objective #2 (Target/Future State)\***

*Please include a numerical target whenever possible, and the date that you expect to hit the target (see example above).*

*Character Limit: 250*

**Baseline Data for Objective #2 (Current State)\***

*Please provide information that indicates where you are starting (current state data) as it relates to your SMART Objective.*

*Character Limit: 500*

**Objective Description #3**

What is trying to be accomplished?

*Character Limit: 500*

**SMART Objective #3 (Target/Future State)**

*Please include a numerical target whenever possible, and the date that you expect to hit the target (see example above).*

*Character Limit: 250*

**Baseline Data for Objective #3 (Current State)**

*Please provide information that indicates where you are starting (current state data) as it relates to your SMART Objective.*

*Character Limit: 500*

**Objective Description #4**

What is trying to be accomplished?

*Character Limit: 500*

**SMART Objective #4 (Target/Future State)**

*Please include a numerical target whenever possible, and the date that you expect to hit the target (see example above).*

*Character Limit: 250*

**Baseline Data for Objective #4 (Current State)**

*Please provide information that indicates where you are starting (current state data) as it relates to your SMART Objective.*

*Character Limit: 500*

**Objective Description #5**

What is trying to be accomplished?

*Character Limit: 500*

**SMART Objective #5 (Target/Future State)**

*Please include a numerical target whenever possible, and the date that you expect to hit the target (see example above).*

*Character Limit: 250*

**Baseline Data for Objective #5 (Current State)**

*Please provide information that indicates where you are starting (current state data) as it relates to your SMART Objective.*

*Character Limit: 500*

**Objective Description #6**

What is trying to be accomplished?

*Character Limit: 500*

**SMART Objective #6 (Target/Future State)**

*Please include a numerical target whenever possible, and the date that you expect to hit the target (see example above).*

*Character Limit: 250*

**Baseline Data for Objective #6 (Current State)**

*Please provide information that indicates where you are starting (current state data) as it relates to your SMART Objective.*

*Character Limit: 500*

## **Part Five: Project Support**

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### **Project Collaboration & Partnerships\***

How have you worked with community partners and/or the people being served to develop this project?

How do you plan to continue to work together throughout this project?

*Character Limit: 3300*

### **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.

*File Size Limit: 2 MB*

### **Optional: Community Support Letter #2**

*File Size Limit: 2 MB*

### **Optional: Community Support Letter #3**

*File Size Limit: 2 MB*

### **Optional: Community Support Letter #4**

*File Size Limit: 2 MB*

### **Optional: Community Support Letter #5**

*File Size Limit: 2 MB*

### **Best Practice\***

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

Please write "N/A" if this does not apply to your project.

*Character Limit: 3300*

### **Fidelity\***

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

Please write "N/A" if this does not apply to your project.

*Character Limit: 3300*

### **Evaluation\***

Please share with us how you plan to evaluate this project.

*Character Limit: 3300*

## How will we know if the project is successful?\*

Character Limit: 3300

## Part Six: Budget Information

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### Project Budget\*

Please download the Central Oregon Health Council's budget document, found **here**. After downloading and completing the budget document, please upload it below.

File Size Limit: 3 MB

**If your project timeline spans more than one year, please break out your budget by individual year. Projects must be five years or less. If your project is one year or less, please provide the total amount requested in "Funding Request - Year One".**

### Funding Request - Year One\*

Character Limit: 20

### Funding Request - Year Two

Character Limit: 20

### Funding Request - Year Three

Character Limit: 20

### 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".

Character Limit: 2500

### Funding Match Amount (if not applicable, leave blank)

Character Limit: 20

## Process Following Submission

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After the application has been submitted, the following steps will occur:

- Applications are due by noon PST on August 17, 2020

- The Community Advisory Council will review the pool of applications in September 2020
- Finalists may be asked to present in October 2020 during the virtual Community Advisory Council meeting
- Applicants will be notified of the Community Advisory Council's final decision via email by October 31, 2020
- Awardees will be guided through the next steps upon notification

If you have any questions, please feel free to contact MaCayla Arsenault at 541.306.3523 or [macayla.arsenault@cohealthcouncil.org](mailto:macayla.arsenault@cohealthcouncil.org)



**COHC Community Advisory Council**

**Held virtually via Zoom**

**June 11, 2020**

**Present:**

Larry Kogosvek, Vice Chair, Consumer Representative  
Michael Baker, Jefferson County Health  
Jolene Greene, Consumer Representative  
Linda Johnson, Community Representative  
Elaine Knobbs-Seasholtz, Mosaic Medical  
Tom Kuhn, Deschutes County Health Services  
Brad Porterfield, Consumer Representative  
Elizabeth Schmitt, Consumer Representative  
Ken Wilhelm, United Way of Deschutes County  
Cris Woodard, Consumer Representative  
Vicky Ryan, Crook County Health Department

**Absent:**

Linda McCoy, Chair, Consumer Representative

**Others Present:**

Lindsay Atagi, PacificSource  
MaCayla Arsenault, Central Oregon Health Council  
Mindy Bentley, Advantage Dental by Dentaquest  
Molly Christopher, St. Charles Madras  
Gwen Jones, Central Oregon Health Council  
June Kasdan, Community Member  
Jennifer Little, Klamath County Public Health  
Elaine Lozier, PacificSource Marion Polk  
Donna Mills, Central Oregon Health Council  
Tanya Nason, PacificSource  
Theresa Olander, Community Member  
Kristen Tobias, PacificSource  
Kelsey Seymour, Central Oregon Health Council  
Lexi Stickel, Pacificsource Columbia Gorge  
Maria Waters, Oregon Health Authority  
Renee Wirth, Central Oregon Health Council

TaNeshia Valenzuela, Crook County Health Department  
Dustin Zimmerman, Oregon Health Authority

### **Introductions**

- Introductions were made and MaCayla Arsenault welcomed all attendees. She announced Linda McCoy has resigned from both the COHC CAC and Board. She announced that Linda Johnson will become the interim chair for the CAC beginning in August until the role can be filled.

### **Public Comment**

- Jennifer Little introduced herself as the Director of Klamath County Public Health, and noted that she participates on the CAC facilitated by the other CCO serving Klamath County.

### **Approval of the Minutes**

- MaCayla noted corrections to be made to the CAC minutes.
  - **ACTION**: Kelsey Seymour will change Tanya Nason's name to Kristen Tobias's name on the third action item.
  - **ACTION**: Kelsey will correct the acronym "DHA" to "DHS".
- Linda Johnson motioned to approve the minutes with the edits mentioned above. Larry Kogosvek seconded. All were in favor, the motion passed unanimously.

### **Action Item Follow Up**

- Kristen shared that there have been five times as many Spanish telehealth requests than the previous average.

### **CCO 2.0 Membership & Updates**

- **Membership & Recruitment Update**
  - MaCayla announced that the Council Chair seat is open to a consumer representative. She noted other requirements, such as adding a county representative from Klamath County, and that all three tribes native to Central Oregon have been invited to participate. She added that a selection committee is also required to ensure compliance with requirements, including all four county representatives, and an equal number of COHC Board members.
  - MaCayla shared that the definition of "consumer" has changed, requiring membership to the CCO to be current or within the last six months.
  - MaCayla noted that making this meeting accessible to members is a top priority, so a poll will be released to determine current members' availability in the evenings.
- **CAC Applicant**
  - Mande Seely introduced herself as an advocate for housing in Sisters.

### **Equity and Diversity Listening Session**

- Miguel Herrada shared a timeline of the PSCS health equity plan, noting that listening sessions ended in February of 2019. He shared the focus will be on language access, plain language, grievances and appeals, diversity and cultural training, and adoption of CLAS standards.
- Brad Porterfield asked if the approach to interpreting can be one of cultural brokering. Miguel shared that the guidelines for medical interpretation are designed to protect interpreters, and becoming advocates for patients is a complex discussion.
  - **ACTION:** MaCayla agreed to bring Miguel back to a future meeting to continue to discussion.

### **Transformation Quality Strategy**

- Lindsay Atagi explained the TQS is a collection of projects by the CCO to support safe, affordable, and high quality care for members. She asked the CAC how they would like to be involved going forward. They asked for updates and to be involved in the selection of next year's goals.

### **Community Benefit Initiative (CBI)**

- MaCayla explained the structure of the Request for Proposal (RFP) for CBI dollars and reviewed options for soliciting proposals. The CAC asked to make decisions via SurveyMonkey.
  - **ACTION:** MaCayla will survey the CAC on the RFP parameters.
  - **ACTION:** Linda, Brad, and Elaine Knobbs-Seasholtz will help write the final RFP.

### **OHA Update**

- Dustin noted that the meeting was out of time, and said he emailed his written update to MaCayla to be shared with the CAC.
  - **ACTION:** MaCayla will share Dustin's update with the CAC.