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

Join Zoom Meeting
https://us02web.zoom.us/j/602446710?pwd=ZDBnV04zeGFGUFIpVkJSSERaNUZHQT09

Join by phone:
+1 669 900 6833
Meeting ID: 602 446 710
Passcode: 114110

September 28, 2021
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

1. Increase letter name recognition at kindergarten
2. Increase third grade reading proficiency
3. Increase proportion of pregnancies that are planned
4. Increase two-year-old immunization rates
5. Establish a regional measure for belonging and measure yearly

AGENDA

3:30 - 3:45 PM Welcome, Land Acknowledgement & Guiding Principles, Introductions
3:45 - 4:50 PM Implementation Plan Development
  • Small Group Work
4:50 - 5:00 PM Wrap Up and Next Steps

Working Document:
https://docs.google.com/presentation/d/1SR6ThnxkIYDpcT2LHHw_beu4ldsDkAWdd1fhHSNAneo/edit?usp=sharing
Future State Metrics – Full Detail

1. By December 2023, letter name recognition at kindergarten readiness will be the following by county:

<table>
<thead>
<tr>
<th>Average Number of Upper Case Letters Recognized (scale 0-26)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Total Population</td>
</tr>
<tr>
<td>-------------------</td>
</tr>
<tr>
<td>Crook County</td>
</tr>
<tr>
<td>Deschutes County</td>
</tr>
<tr>
<td>Jefferson County</td>
</tr>
</tbody>
</table>

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:

<table>
<thead>
<tr>
<th>3rd Grade English Language Arts Proficiency by County (weighted)</th>
</tr>
</thead>
<tbody>
<tr>
<td>All Students</td>
</tr>
<tr>
<td>----------------</td>
</tr>
<tr>
<td>Crook County</td>
</tr>
<tr>
<td>Deschutes County</td>
</tr>
<tr>
<td>Jefferson County</td>
</tr>
</tbody>
</table>

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.
Land Acknowledgement

We recognize and acknowledge the indigenous land of which we live, work, learn, play, and grow. This land of the Mololla, Paiute, Klamath, Modok, Yahooskin Band of Snake Indians, Confederated Tribes of Middle Oregon, and Confederated Tribes of Warm Springs. We acknowledge them as the past, present, and future caretakers of this land. It is on their traditional land where we partner to improve the health and well-being of Central Oregonians. We aspire to be good guests honoring the concept in the Warm Springs culture: “This land is for you to know and live upon and pass on to the children.”
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.

Partner with Priority Populations
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.
Upstream Prevention: Promotion of Individual Well-Being

Background: Why are we talking about this?

- 1973 Roe v. Wade
- 1990s ACEs Study
- Evolving birth control options
- No Child Left Behind
- National Traumas (9/11, school shootings)
- Anti-Vax (Vaccine) Movement

Upstream strategies improve fundamental social and economic structures that allow people to achieve their full health potential. Discrimination and racism impact all aspects of a person’s well-being and intersect with all major systems of society. Educational status provides a significant predictor of health outcomes. Third-grade disparities exist for marginalized populations by race and economic status.

Current Condition: What’s happening right now?

- In Central Oregon, early literacy had a decreasing trend from 2016 to 2018

Current State Metrics:
1. Letter recognition at kindergarten for economically disadvantaged: Crook 11.9, Deschutes 12.1, Jefferson 9.4
2. Third grade reading for underserved races: Crook 29%, Deschutes 41%, Jefferson 35.4%
3. 44.8% of pregnancies were intended in Central Oregon
4. Two-year-old up-to-date immunization rates: Crook 70%, Deschutes 69%, Jefferson 71%
5. No established baseline for a metric such as the Child/Youth/Adult Resilience Measure

Goal Statement: Where do we want to be in 4 years?

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.

Future State Metrics - By December 2023:
1. Increase letter name recognition at kindergarten for economically disadvantaged and/or underserved races
2. Increase third grade reading proficiency for economically disadvantaged and/or underserved races
3. Increase proportion of pregnancies that are intended
4. Increase two-year-old immunization rates
5. Establish a resiliency measure, measure yearly and increase the number of people who feel they belong in their community

Analysis: What’s keeping us from getting there?

- Unbalanced distribution of resources across the region
- Decision-making based on misinformation and personal belief
- Systemic inequity prevents access to usable information
- Unbalanced bias creating isolation (connection vs alienation)
- Generational impact of foundational instability

Strategic Direction: What are we going to try?

- Transforming care coordination across health systems
- Cultivating equity and inclusion in our communities
- Operationalizing DEI practices
- Broadening education to improve health outcomes
- Advocating for policies that improve health outcomes

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

<table>
<thead>
<tr>
<th>Future State Measures</th>
<th>What</th>
<th>When</th>
<th>Where</th>
</tr>
</thead>
<tbody>
<tr>
<td>Improving Kinder Readiness and 3rd Grade Reading</td>
<td>Community Grant Opportunity</td>
<td>Awarded 7.2021</td>
<td>Full region. Focus on priority populations</td>
</tr>
<tr>
<td>Increase proportion of pregnancies that are intended</td>
<td>Media Campaign Promoting Intended Pregnancies</td>
<td>RFP released 8.23.21</td>
<td>Full region. Focus on 18-24yo, under resourced, specific identities and their partners</td>
</tr>
<tr>
<td>Increase two-year-old immunization rates</td>
<td>Central Oregon Immunization Quality Improvement Coordinator</td>
<td>RFP released 8.4.21</td>
<td>Full region. Clinics and public health</td>
</tr>
<tr>
<td>Create a regional measure for Resilience and Belonging</td>
<td>Create a regional measure for Resilience and Belonging</td>
<td>Request for Application Fall 2021</td>
<td>Full region. Representative sampling.</td>
</tr>
</tbody>
</table>

Follow-Up: What’s working? What have we learned?

{insert}
**Upstream Prevention: Promotion of Individual Well-Being**

2020-2024 RHIP Workgroup Budget

Updated August 30, 2021

Funds Available $1,720,839
Initial Funds (spread over 5 years) $2,000,000
Funds Spent $279,161

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**Amount Invested by Future State Measure**

<table>
<thead>
<tr>
<th>Measure</th>
<th>Amount Invested</th>
</tr>
</thead>
<tbody>
<tr>
<td>Increase third-grade reading proficiency</td>
<td>$105,000.00</td>
</tr>
<tr>
<td>Increase letter name recognition at kindergarten readiness assessment</td>
<td>$114,475.00</td>
</tr>
<tr>
<td>Increase two-year-old immunization rate</td>
<td>$10,000.00</td>
</tr>
<tr>
<td>Increase the proportion of pregnancies that are intended</td>
<td>$0.00</td>
</tr>
<tr>
<td>Establish a resilience measure and increase the number of people who feel they belong by community</td>
<td>$24,686.00</td>
</tr>
</tbody>
</table>

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**Allocation of Funds by Measure**

- Increase third-grade reading proficiency
- Increase letter name recognition at kindergarten readiness assessment
- Increase two-year-old immunization rate
- Establish a resilience measure and increase the number of people who feel they belong by community

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**Allocation of All Funds ($2M)**

- Increase third-grade reading proficiency
- Increase letter name recognition at kindergarten readiness assessment
- Increase two-year-old immunization rate
- Establish a resilience measure and increase the number of people who feel they belong by community
- Unallocated
- COVID-19 ($25k pooled funds)
For the 2021-2024 funding years, each workgroup’s annual investment goal is a minimum of $500,000. The Central Oregon Health Council is required by law to invest a total of at least $2.5M each year through the workgroups. Each workgroup is expected to do their part in helping to reach this $2.5M annual commitment.
### 2020-2024 RHIP Workgroups
#### 5 Year Budget

Updated August 30, 2021

**Funds Available** $10,437,563
**Initial Funds (spread over 5 years)** $12,000,000
**Funds Spent** $1,562,437

<table>
<thead>
<tr>
<th>Amount Invested by Workgroup</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>Address Poverty*</td>
<td>$579,506.79</td>
</tr>
<tr>
<td>Behavioral Health</td>
<td>$54,275.00</td>
</tr>
<tr>
<td>Physical Health</td>
<td>$109,494.06</td>
</tr>
<tr>
<td>Stable Housing</td>
<td>$505,000.00</td>
</tr>
<tr>
<td>Substance &amp; Alcohol Misuse</td>
<td>$35,000.00</td>
</tr>
<tr>
<td>Upstream Prevention</td>
<td>$279,161.00</td>
</tr>
</tbody>
</table>

**Address Poverty** workgroup is still in the process of awarding these funds for their Graduation Rates RFP.

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For the 2021-2024 funding years, each workgroup’s annual investment goal is a minimum of $500,000. The Central Oregon Health Council is required by law to invest a total of at least $2.5M each year through the workgroups. Each workgroup is expected to do their part in helping to reach this $2.5M annual commitment.
Community Partner Satisfaction Survey Results

Regional Health Improvement Plan

The Community Partner Satisfaction Survey conducted in February, 2021 solicited feedback on the relationships of the Central Oregon Health Council. The survey did not inquire specifically about Regional Health Improvement Plan Workgroups, but nearly half of all open-ended responses pertained to it.

You are all doing an incredible job. The processes are extremely equitable and based on research and evaluation.

Continue to strive for equal voice for entities, especially amongst those who may be competitors in the same field.

Continue to reach out to organizations not represented on the committees.

Top 3 Themes

Inclusion Desire to bring in new organizations, new sectors and more voices from priority populations.

Investments Concern about how quickly decisions are made, by whom, and bias.

Networking Desire to know how other workgroups, organizations and sectors are contributing to efforts.

Top 3 Themes

39 RHIP Comments
12 Kudos
27 Suggestions

Our Next Steps

Engage New Voices Staff and workgroup partners will develop a plan to engage new sectors and community members.

Accountability Staff will continue to add transparency to workgroup communication efforts.

Build Connections Staff will implement new ways for workgroups to interact and hear about one another’s work.

Central Oregon Health Council
Central Oregon Health Council  
Commitment to Diversity, Equity, Inclusion & Justice

Racism is a public health crisis. Every human being has a basic right to health.

As an organization created to improve the well-being of all residents across Central Oregon, the Central Oregon Health Council (COHC) has a responsibility to promote and protect that right to health. We know that health equity will never be achieved unless we address the racism and inequality resulting from biased policies, practices, and ideologies that helped shape Oregon and continue today.

People of color and tribal nations experience pervasive and deep health disparities. By focusing on race, we create a framework to address the impacts of inequality experienced by people who are also marginalized by ability, sexual orientation and gender, and people who live at the intersection of these and other identities. These persisting health inequities threaten the principles and priorities that the COHC was formed to address.

The Central Oregon Health Council is committed to diversity, equity, inclusion and justice in our work culture, grant making, and community partnerships. This is essential to achieving our purpose to build an equitable and integrated health ecosystem that improves the well-being of all Central Oregonians. As a community-led organization, we pledge to work with our partners to address the racial inequities within our communities and organizations.

The COHC commits to:

- engaging and learning with our diverse Central Oregon communities, especially populations who have been excluded, underrepresented, and underserved;
- listening and elevating the voices of communities who are most impacted by our work;
- co-creating with communities throughout our region to achieve more inclusive thinking, values and practices to meet their diverse needs for partnership;
- applying a health equity analysis to all of our programs, policies, practices, and grants;
- striving to provide regional leadership on health equity through shared governance and accountability with our Coordinated Care Organization and implementation of the Regional Health Assessment and Regional Health Improvement Plan;
- publicizing and referencing this commitment in all appropriate communications;
- evaluating how we follow through on this Commitment to Diversity, Equity, Inclusion, and Justice, and publicly sharing both our successes and failures.

*We recognize we have a lot to learn and much work to do. We ask our partners, members, and staff to support and hold us accountable to this commitment.*

**Call to Action**
The COHC calls on all its members, partners and leaders to develop, adopt, and implement similar commitments to diversity, equity, inclusion and justice. *Together, we must identify meaningful solutions to dismantle structural racism. We must ensure every person has the freedom to be healthy, to be safe, and to thrive.*
Background

Health equity means that everyone has a fair and just opportunity to be as healthy as possible. Social determinants of health contribute to health disparities and inequities. These conditions affect a wide range of health, functioning, and quality-of-life outcomes and risks. Racism, discrimination, violence, and wealth inequities are examples.

Structural racism is a fundamental social determinant that has been woven tightly into the fabric of American society. Structural racism establishes and reinforces a legacy of racial oppression and differential distribution of goods, services, opportunities, and protections by race. These include safe and affordable housing, quality education, adequate income and wealth building capacity, accessible quality health care, access to healthy food, safe and healthy neighborhoods, social connectedness and belonging.

Since 2020, the Centers for Disease Control, American Medical Association, and American Public Health Association have declared racism a serious public health emergency and threat. More agencies and states continue to join this declaration.

The Oregon Health Authority and the Governor have prioritized health equity. The State of Oregon Diversity, equity and Inclusion Action Plan aims to guide the still early efforts of the state enterprise to dismantle racism and establish a shared understanding. The purpose of Healthier Together Oregon: 2020-2024 State Health Improvement Plan is to advance health equity. Coordinated Care Organizations and Public Health Departments are implementing comprehensive health equity plans. Health equity is not just a strategic priority, but essential to the organizational mission and values of the Central Oregon Health Council.

Health equity is a cornerstone of the 2020-2024 Central Oregon Regional Health Improvement Plan (RHIP). Central Oregon strives toward an equitable health system where all people can reach their full health potential and well-being. Achieving health equity requires ongoing collaboration of all Central Oregon communities to address the inequitable distribution of resources, wealth and power; and to recognize, reconcile and rectify historical and contemporary injustices (2020-2024 RHIP).

Our Journey To Date Towards Health Equity

The COHC was founded in 2009 by medical and government leaders within our Central Oregon communities with the vision of improving health for every individual living in our region. Since then, the COHC has grown and the regional understanding of health, social determinants of health and health equity has evolved and developed. Out of our desire to better engage our communities, our partnerships have expanded outside the medical community to non-profit social services and education. Partnership remains an integral part of who the COHC is.

The Central Oregon Diversity, Equity, and Inclusion (CODEI) Committee was formed in 2019 to provide actionable strategies to advance diversity, equity and inclusion in support of the goals of the Central Oregon Health Council (COHC) as articulated in the Regional Health Improvement Plan (RHIP). Since the inception of CODEI, the COHC has accomplished the following:
● Creation and implementation of CODEI Action Plan, and development of resources to support progress in advancing health equity
● Supported the COHC Board of Directors prioritization of health equity in the current strategic plan
● Highlighting opportunities to advance health equity in RHIP workgroups
● Inclusion of health equity priority in community grant programs
● Beginning to identify and share data to support health equity