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

Join Zoom Meeting
https://us02web.zoom.us/j/81740168359?pwd=RzV5ZU1nVk9adFp6ZHG2RzV4OFU1Zz09

Join by phone:
+1 669 900 6833
Meeting ID: 817 4016 8359
Passcode: 446602

September 27, 2022
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 - 4:00 PM  Equity Review
4:00 - 4:55 PM  Implementation Plan
  •  Next Steps for Kindergarten Readiness Discussion
4:55 - 5:00 PM  Wrap Up and Next Steps

Working Document: https://docs.google.com/presentation/d/1SR6ThnxkIYDpcT2LHHw_beu4IdsDkAWdd1fhHSNAneo/edit?usp=sharing

Workgroup Budget: https://docs.google.com/spreadsheets/d/1Gw9dL6ilRe1olGhJRMIoxg9pEUofj-KzUSWscBbEX8/edit?usp=sharing
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:

<table>
<thead>
<tr>
<th>Total Population</th>
<th>Economically Disadvantaged</th>
<th>Underserved Races</th>
</tr>
</thead>
<tbody>
<tr>
<td>Crook County</td>
<td>15.8</td>
<td>14.3</td>
</tr>
<tr>
<td>Deschutes County</td>
<td>17.5</td>
<td>14.6</td>
</tr>
<tr>
<td>Jefferson County</td>
<td>13.2</td>
<td>11.3</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>Total Students</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 Acknowledgment

We recognize and acknowledge the indigenous land on which we live, work, learn, play, and grow. This is the land of the Warm Springs, Wasco, Northern Paiute, Tenino, Klamath, Molalla, and Yahooskin. We acknowledge them as the past, present, and future caretakers of this land. It is on their traditional land that 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.”

Upstream Prevention: Promotion of Individual Well-Being

RHIP Workgroup Virtual Meeting
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
2000s Tech Advancement and Screen Time
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 kindergarten 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 Preganacies</td>
<td>Awarded 1.2022</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>Awarded 2.2022</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>Awarded 12.2021</td>
<td>Full region. Representative sampling.</td>
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</tbody>
</table>

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

(insert)
# Five-Year Investment Overview
## All Workgroups
### January 2020–December 2024

<table>
<thead>
<tr>
<th>Budget</th>
<th>Spent</th>
<th>Available</th>
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</thead>
<tbody>
<tr>
<td>$12,000,000</td>
<td>$7,021,309</td>
<td>$4,978,691</td>
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<table>
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<tr>
<th>Workgroup</th>
<th>Spent</th>
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<tbody>
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<td>Address Poverty</td>
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<td>Behavioral Health</td>
<td>$1,874,623</td>
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<td>Physical Health</td>
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<td>Stable Housing</td>
<td>$1,119,654</td>
<td>$880,346</td>
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<td>Substance and Alcohol Misuse</td>
<td>$580,580</td>
<td>$1,419,420</td>
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<tr>
<td>Upstream Prevention</td>
<td>$1,388,326</td>
<td>$611,674</td>
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</table>
## UPSTREAM PREVENTION
### 2022 Budget

### Overview
<table>
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<th></th>
<th>Budget</th>
<th>Spent</th>
<th>Available</th>
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<td>5-Year</td>
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<td>$1,388,326</td>
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<td>Cycle to Date</td>
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<td>Yearly Mini-Grant</td>
<td>$50,000</td>
<td>$17,500</td>
<td>$32,500</td>
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</table>

*Review MG Budget in August

### By Future State Measure (5 year)

<table>
<thead>
<tr>
<th>Future State Measure</th>
<th>Budget*</th>
<th>Spent</th>
<th>Available</th>
<th>Currently Allocated</th>
<th>Projected Available</th>
<th>Notes</th>
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<td>Childhood Immunization</td>
<td>$429,428.00</td>
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<td>$0.00</td>
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<td>Third-Grade Reading</td>
<td>$385,295.33</td>
<td>$109,018.50</td>
<td>$276,276.83</td>
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<td>$276,276.83</td>
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<tr>
<td>Kindergarten Readiness</td>
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<td>$115,993.50</td>
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<td>$269,301.83</td>
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<td>Resilience Measure</td>
<td>$389,686.00</td>
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<td>Intended Pregnancies</td>
<td>$385,295.33</td>
<td>$300,000.00</td>
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<td>$85,295.33</td>
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</table>

*Budget for each FSM reflects the agreed upon 5 year ‘soft budget’ minus the portion contributed to shared minigrant budget and adjustments for historical investments.
<table>
<thead>
<tr>
<th>Organization</th>
<th>Process</th>
<th>Project</th>
<th>Award</th>
<th>Decision Date</th>
<th>Future State Measure</th>
<th>Latest Report</th>
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</thead>
<tbody>
<tr>
<td>Deschute County Health Services</td>
<td>Standard Grant Immunization Consultant Application (2020-2024 RHIP)</td>
<td>Central Oregon Regional Childhood Immunization Project</td>
<td>$419,428.00</td>
<td>2.4.22</td>
<td>Increase two-year-old immunization rate</td>
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<tr>
<td>Brink Communications</td>
<td>Standard Grant Media Campaign Promoting Intended Pregnancy Consultant Application (2020-2024 RHIP)</td>
<td>Central Oregon Health Council RFP Response for Media Campaign Promoting Intended Pregnancy</td>
<td>$300,000.00</td>
<td>2.4.22</td>
<td>Increase the proportion of pregnancies that are intended</td>
<td>Progress Report 8.2022</td>
</tr>
<tr>
<td>Catalyst Counseling &amp; Consulting, LLC</td>
<td>Mini-Grant Application (2020-2023 RHIP)</td>
<td>Mental Health Groups For Teens</td>
<td>$2,500.00</td>
<td>5.16.2022</td>
<td>Pulled from across all measures with available funds</td>
<td>Establish a resilience measure and increase the number of people who feel they belong by community</td>
</tr>
<tr>
<td>Workability</td>
<td>Mini-Grant Application (2020-2023 RHIP)</td>
<td>Expanding Job Opportunities for Neurodiverse Talent in Central Oregon</td>
<td>$5,000.00</td>
<td>7.15.22</td>
<td>Pulled from across all measures with available funds</td>
<td>Establish a resilience measure and increase the number of people who feel they belong by community</td>
</tr>
<tr>
<td>Organization</td>
<td>Mini-Grant Application (2020-2023)</td>
<td>Program Description</td>
<td>Amount</td>
<td>Date</td>
<td>Notes</td>
<td></td>
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<td>-------------------------------</td>
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<td>-------------------------------------------------------------------------------------</td>
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</tr>
<tr>
<td>Parousia dba SriPonya</td>
<td>Wisdom of Trauma Movie Screening &amp; Homeless Panel Discussion</td>
<td>$5,000.00 7.15.22 Pulled from across all measures with available funds</td>
<td>$5,000.00</td>
<td>7.15.22</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Healing Reins Therapeutic Riding Center</td>
<td>Certified Therapeutic Riding Instructor Professional Development</td>
<td>$5,000.00 8.15.22 Pulled from across all measures with available funds</td>
<td>$5,000.00</td>
<td>8.15.22</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Establish a resilience measure and increase the number of people who feel they belong by community.
Form Name:
RHIP Annual Report: Year One

High Desert ESD
Creciendo Girasoles (Growing Sunflowers)

<table>
<thead>
<tr>
<th>FollowUp Snapshot</th>
</tr>
</thead>
<tbody>
<tr>
<td>Amount Requested</td>
</tr>
<tr>
<td>Organization Contact</td>
</tr>
<tr>
<td>Organization Phone</td>
</tr>
<tr>
<td>Contact Email</td>
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<tr>
<td>Organization Address</td>
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<td></td>
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<tr>
<td>Website</td>
</tr>
<tr>
<td>Project Lead</td>
</tr>
<tr>
<td>Project Lead Email</td>
</tr>
</tbody>
</table>

RHIP Workgroup:
Upstream Prevention: Promotion of Individual Well-Being

Future State Measure:
Upstream Prevention: Promotion of Individual Well-Being > Increase letter name recognition at kindergarten readiness assessment
Upstream Prevention: Promotion of Individual Well-Being > Increase third-grade reading proficiency
Contact Information

Organization Name*

High Desert ESD

Project Name

Creciendo Girasoles (Growing Sunflowers)

Date you are submitting this annual report*

08/25/2022

Name and Title of Submitter*

Kayla Hefling Director of Regional Migrant Education Services

Email Address*

kayla.hefling@hdesd.org

Phone Number*

5413106616

Project Details

Annual Report: Primary Activities*

Please describe the project and primary activities.

This proposal falls in the "After School/Enrichment" Category. Migrant Education is planning to expand after-school services to six sites in Central Oregon. For this reporting cycle the After School Program took place in Redmond at Obsidian Middle School in the Redmond School District for 6 weeks, April 18th through May 23rd. Students from the Bend-LaPine District also attended at this location.

The plan is to continue expanding the After School Program to more sites.

The schedule is as follows:
5:30-6:00 Dinner for students, siblings, and families (Hot meals served in a sit-down setting in the school cafeteria.)
6:00-7:00 Grades PreK-4 Academics; Grades 5-8 STEM Activities
7:00-7:15 Break with a Snack
7:15-8:00 Grades PreK-4 STEM Activities; Grades 5-8 Academics
6:00-8:00 Parents can attend informational sessions while students are in Academic and STEM classes. Parent informational sessions may include: Computer Literacy, Legal Rights (immigration challenges; obtaining a driver’s license, connecting to other services); Helping students with homework/literacy and numeracy strategies; Health and Nutrition, Resume development.

Four teachers were employed for this site: 1 Language Arts, 1 Math, 1 STEM, and community partners to work with parents. The Language Arts and Math Teachers are certified teachers. Depending on the group size, Educational Assistants and Community Volunteers also provide support services to this program.

The Academic and STEM activities build Kindergarten readiness and focus heavily on reading skills. These future state metrics for Upstream Prevention are the focus of the Migrant Education After School programs.

**Annual Report: Summary of Results**
*Please provide a summary of the results, outcomes, and benefits of the project, including a current overall assessment of its success and impact to date.*

Data collected, plus 3rd SMART goal will be assessed for the 22/23 annual report.

**Annual Report: Stories**
*Please provide a brief story or quote that illustrates how this project has had a positive impact on the Central Oregon region.*

One of the objectives of the After School Program is not only to provide academic instruction but also family centered learning. The After School Program that took place this year included many community partnerships that were able to connect with our families, including local healthcare non-profits, the Deschutes Library, the High School Equivalency Program, and much more. During these workshops and community partner visits our families were able to connect and engage with the many resources in the community.

**Permission to Share Annual Report Stories**
*Please indicate whether or not the COHC has permission to use the story or quote you provided above in social media and/or other mediums/publications.*

Yes, the COHC is permitted to publicly share the stories I’ve shared above.

**Project Completion at Time of Annual Report**
*Please indicate whether your project is complete or in progress. If it is in progress, please estimate the percent complete at the time of this report.*
My project is in progress and is approximately 26-50% complete

**Timeline***
If your project is in progress, please indicate whether you are on track with the timelines indicated in your application.

My project is in progress, but we are behind the timelines indicated in our application

**Estimated Completion Date for Project at Time of Annual Report**
Please provide an estimated completion date for your project. If your project is complete, leave blank.

06/30/2023

**Are you encountering any problems or challenges in fulfilling the terms of the project agreement?***

Yes

**Mid-Course Problems or Challenges (Continued)***
If you stated that you are encountering problems or challenges in fulfilling the terms of the grant agreement, provide detail below. Please explain what mid-course corrections you plan to implement to help mitigate those challenges/barriers.

*If you are not encountering challenges, please type N/A.*

We are not on track to offer 6 individual sites, it has become apparent that this is unrealistic. The more realistic approach is to offer sites that combine neighboring school districts/cities. An example would be to combine Madras and Culver, Sisters and Redmond, etc... There are not enough Migrant ED students in Sisters to support a site in the city itself, likewise with Culver and Prineville.

**Mid-Course Community Connections***
Are there any connections within the community that the COHC can help facilitate that might be helpful with respect to the implementation or success of your project?

No

**Mid-Course Community Connections (Continued)**
Please provide detail on the community connections that you feel the COHC might be able to help with.

Please note, we strive to make connections and break-down siloes whenever possible. We will do our best to facilitate a relationship with the party or parties you mention.

The funding provided by this grant has enabled the Migrant Education Program to provide a robust and enriching After School Program, nothing else is needed at the time. The schedule for the AFS has a limited capacity to include any other components that would fit into the current schedule.

**Progress on Sustainability**

*If applicable, please describe any progress made toward sustaining this project beyond the current granted funds. Please provide details about other resources secured and plans for receiving additional funding sources.*

Please write

After beginning this project, one of the major steps towards sustainability was re-evaluating how many sites could actually be sustained. In combining the different cities/school districts that neighbor each other closely geographically we have created a more sustainable model that would be more effective in its current stage, and to maintain after the COHC funding.

We are currently using Migrant Education Dollars to support the After-School Program at the current level of operation. Funding from the Central Oregon Health Council will allow us to expand the program to additional sites over a two year period--1 new program in 2021-22, and two new programs in 2022-23. Migrant Education funding will sustain the program added in 2021-22 during the 2022-23 school year.

At the end of this two year period, we plan to rework the Central Oregon Migrant Education budget to allow for sustainability at the 3 targeted sites. Migrant Education dollars are increasing at the federal level overall, but inflation and the increase in Migrant students across the nation make expansion of these After-School programs challenging. However, because After-School Programs have proven to be so effective, more dollars will be allocated towards this endeavor at the state and regional level.

One of the prospective funding sources for the Migrant Education Program include the Student Investment Account that has signaled at a state level the requirement to engage migrant students and families, which would include the intentionality of funding.

Additionally, local Federal Programs Administrators employed by our six school districts understand the importance of our Migrant After-School Programs. School Districts are exploring ways to supplement these After-School Programs, and we feel confident that we will be able to sustain these six programs through increased federal funding and local school district support.

Lastly, the Migrant Education Program of Central Oregon is continually on the lookout for funding from local and regional foundations. We have been successful with these applications over the past three years.
Older Adults Served
Please provide the unique number of individuals ages 60+ served to date by this project.

32

Adults Served
Please provide the unique number of individuals ages 18-59 served to date by this project.

65

Children & Adolescents Served
Please provide the unique number of adolescents and children ages 17 & under served by this project.

32

SMART Objective #1 (Target/Future State)
By June 30, 2022, 80% of Pre-K Migrant students entering Kindergarten will demonstrate "average ability" when assessed on Kindergarten Readiness targets, which include: Early Literacy, Early Math, and Approaches to Learning.

Objective #1: Progress*
Please provide your current progress on this objective.

The spring After School Program held in Redmond, OR yielded the following growth results obtained by pre and post testing for Kindergarten Readiness targets:
An average of 24% percent growth in the following areas

Early Literacy:
Alphabet letter recognition
Phonics
Syllable Recognition
Letter Recognition
Early Writing Skills

Early Math
Number recognition
Counting
Shape Recognition

This growth was observed after only a 6 week program and in some cases, including irregular attendance.

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

By June 2022, 80% of Migrant third graders involved in the Migrant After-School Program will be on target for attaining 3rd grade reading proficiency when measured by the Regional Migrant Academic Assessment of literacy and numeracy skills.

**Objective #2: Progress**

*Please provide your current progress on this objective.*

*If your proposal only contained one objective, please type N/A.*

The spring After School Program held in Redmond, OR yielded the following growth results obtained by pre and post testing for Third Grade Reading Proficiency:

Utilizing pre and post testing, the following categories yielded:

- Spelling: 68% growth
- Daily Oral Language: 110% growth
- Reading Comprehension: 83% growth

This growth was observed after only a 6 week program and in some cases, including irregular attendance.

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

By June 2023, 100% of Migrant parents will respond positively to a survey administered to gauge the impact of the Migrant Education after-school program on family engagement.

**Objective #3: Progress**

*Please provide your current progress on this objective.*

*If your proposal only contained two objectives, please type N/A.*

The data for this objective will be included in the 2022-2023 final progress report.

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

**Objective #4: Progress**
Form Name:
Final Report - Standard Process

Crook County Health Department
Continuation of the CO Regional Immunization Rate Improvement Project/AFIX Implementation Project

<table>
<thead>
<tr>
<th>FollowUp Snapshot</th>
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</thead>
<tbody>
<tr>
<td>Amount Requested</td>
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<td>Website</td>
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<tr>
<td>Project Lead</td>
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<tr>
<td>Project Lead email</td>
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</table>

RHIP Workgroup:
N/A: This proposal is not associated with a RHIP workgroup

Future State Measure:
Note: * indicates required questions

Contact information

Investment/Project Name*

_Name of Project._

Continuation of the CO Regional Immunization Rate Improvement Project/AFIX Implementation Project

Date you are submitting this final report*

09/15/2022

Project details

Final report: Primary activities*

_Please describe the project or program and primary activities._

The regional childhood immunization rate improvement project that occurred between 2016-2019 raised immunization rates across the Central Oregon region by about 8% as a result of the AFIX/Immunization Rate Improvement Project Implementation. This project goal was to build upon the momentum of that project implementing data quality improvement strategies at the provider level to increase immunization coverage therefore making additional progress to meet the goal of 80% of two-year old’s in the state of Oregon receiving all childhood required vaccines. This project due to its short duration and support from the COHC was primarily focused on children enrolled in the Oregon Health Plan.

Final report: Summary of results*

_Please provide a summary of results, outcomes, and benefits of the project or program, including an overall assessment of its success and impact._

While immunization rates improved for the target group over the course of the project, it is impossible to discern whether any real improvement was due to the additional engagement with clinics due to the short duration of the project or inevitable increase in two-year old’s immunized over the course of the calendar year. In either case, encouraging clinics to prioritize childhood immunizations again, in the face of an ongoing pandemic likely did have a benefit. The feedback from participating clinics was also noted as positive. In addition, simplifying the immunization data quality improvement process from clinics and streamlining communication resources with Pacific Source were steps towards the larger picture in a strained clinical environment that will have a lasting impact on future immunization projects/work.

The feedback and exchange meetings were very informative for participating clinics. These meetings served as platforms for sharing lessons learnt and continuous improvement.
Final report: Stories*

*Please provide one or two brief stories or anecdotes that illustrate how this grant has had a positive impact on someone’s life.

Although we do not have a recent stories from clients, participating clinics have told us on numerous occasions how helpful this project has been to their clinics. The assessment, feedback and coalition meetings were particularly helpful for sharing knowledge and lessons learnt. The incentives helped alleviate some of the financial burdens that clinics bore in the past. See below comments from COPA

From 2016-2018, COPA worked with DCHS on a similar project to improve two-year-old immunization rates by implementing organizational immunization strategies recommended by the Regional Assessment, Feedback, Incentive, and eXchange (AFIX) Project. During that time, COPA saw a drastic improvement in our two-year-old immunization rates from 62% in July 2016, to 74% in October 2018. We know how successful the AFIX model has been in our community, and we fully support this project knowing that the current project is building upon that framework.

Our region has been experiencing a rise in parental vaccine hesitancy and anti-vaccination sentiment, making it increasingly difficult to achieve the vaccination levels required to protect our children and community. This trend predates COVID but has been further compounded by the pandemic. With DCHS managing this role, the clinics will be able to engage and participate in the project, but they can stay focused on priority patient and family care.

Permission to share final report stories*

*Please indicate whether or not the Health Council has permission to use the story or stories you provided above in social media and/or other mediums/publications.

N/A: Please select this option ONLY if you did not share any stories in this report

Final report: Did you encounter any problems or challenges in fulfilling the terms of the grant?*

Yes

Final report: Problems or challenges (continued)*

*If you stated that you encountered problems or challenges in fulfilling the terms of the grant, provide detail below. Please include an explanation of how you addressed them, a statement about what the organization would do differently if given the opportunity to repeat the project or program, and any lessons learned. If you did not encounter challenges, please type N/A.

The ongoing pandemic, strains and demands on clinic staff, as well as the short duration of this project all played a role in challenges experienced with this project. In addition to these named challenges, those working on this project itself either changed roles, retired, or left their roles entirely which also caused it’s own set of challenges.
Moving forward, each participating county will be training more than one staff member with Oregon Health Authority Immunization Project trainings, so that, in the event that internal staff carrying out this project or type of project vacates their role, there is someone whom can step into that role more seamlessly. There will also be more formalized sharing of work completed as the work is conducted for future projects.

Final report: Connections within the community*

*Were there any connections within the community that the Health Council could have facilitated that would have improved implementation and/or success of your program or project?

No

Final report: Connections (continued)*

*If you indicated yes above, please provide detail on the connections within the community that you feel the Health Council could have helped facilitate.

The Health Council has always been widely available, flexible, and engaged in the work we have been tasked with. We are grateful for the continued support they have offered.

Cross-system information sharing*

*Did you utilize any cross-system information sharing strategies in this project?

Yes

Cross-system information sharing (continued)*

*If you indicated yes above, please provide detail on the cross-system information sharing strategies used in this work. If none, please type N/A.

For this project, we worked across various data collection platforms, and tri county clinics. It is through this joint efforts and continued sharing of information across these platforms that we were able to support one another in making progress. PacificSource was a large contributor in simplifying the lists generated and sent to clinics to review current patient data. OHA was instrumental in assisting by providing ALERT data to county entities and clinics to track our progress towards meeting our goals. Clinics and those working in them worked diligently in sharing methods of reaching patients and their families for vaccine recall.

Older adults served

*Please provide the unique number of individuals ages 60+ served to date by this project

0
Adults served

Please provide the unique number of individuals ages 18-59 served to date by this project.

0

Children & Adolescents served

Please provide the unique number of adolescents and children ages 17 & under served by this project.

50000

Objective #1

Year 1 - July 1, 2019 - June 30, 2020
Objective: Improve communication and create an online system to improve information for the AFIX participants.

Target for objective #1

Objective: By June, 2020, the regional immunization coordinators will create a data collection/storage process, create method to keep AFIX participants informed/motivated/on-track, determine format for eXchange opportunities (Best Practices Meetings and Immunization Coalition Meetings).

Objective #1: Progress*

Please provide your progress on objective #1 from your proposal (where you actually landed).

Spreadsheets were created to exchange information among staff working on the AFIX project as well as clinic staff. Binders were also created to store some of the information that was collected from the various clinics.

Objective #1: Met or not met*

Did you meet or exceed the target for objective #1?

Yes, I met or exceeded the target for objective #1

Objective #2

Year 1 - July, 2019 - June, 2020
Objective: Complete AFIX training for all Immunization Program Coordinators by the State Immunization Program.

Target for objective #2
By December 2019, the Crook, Deschutes, and Jefferson County Immunization Coordinators will be trained in the AFIX process by the Oregon Health Authority Immunization Program.

**Objective #2: Progress***
*Please provide your progress on objective #2 from your proposal (where you actually landed).*

*If your proposal only contained one objective, please type N/A.*

Immunization coordinators from Deschutes county were trained by Oregon Health Authority who then worked with the other immunization coordinators from Crook and Jefferson Counties and shared lessons learnt from the training.

**Objective #2: Met or not met***
*Did you meet or exceed the target for objective #2?*

Yes, I met or exceeded the target for objective #2.

**Objective #3**

Years 1, 2, 3 - July 2019 - June 2022

Objective: Improve the ability of the clinics to participate in AFIX and improve immunization rates.

**Target for objective #3**

By June 2022, schedule and facilitate Feedback meetings with at least 25% of VFC enrolled clinics in each county which includes partnering with Oregon Health Authority to complete Feedback meetings with clinics and implementation of new strategies.

**Objective #3: Progress***
*Please provide your progress on objective #3 (where you actually landed).*

*If your proposal contained two or less objectives in your original proposal, please type N/A.*

Feedback meetings were facilitated and completed with participating clinics. New strategies were implemented and lessons learnt shared among all attendees. 15 clinics were completed out of 36.

**Objective #3: Met or not met***
*Did you meet or exceed the target for objective #3?*
Yes, I met or exceeded the target for objective #3

**Objective #4**

Years 1, 2, 3 - July 2019 - June 2022
Objective: Improve education and information to regional partners.

**Target for objective #4**

By June 2022, the regional immunization coordinators will plan and facilitate two Best Practice Meetings and two Immunization Coalition Meetings, collect assessment data from clinic champions, provide opportunity for data analysis and strategy updates, compile data and write summary reports.

**Objective #4: Progress**

*Please provide your progress on objective #4 (where you actually landed).*

*If your proposal contained three or less objective, please type N/A.*

Some meetings were held but others had to be cancelled due to COVID. However, continued virtual collaborations occurred across the Tri-County to enable collection of data, analysis and updates.

**Objective #4: Met or not met**

*Did you meet or exceed the target for objective #4?*

Yes, I met or exceeded the target for objective #4

**Objective #5**

Years 1, 2, 3 - July 2019 - June 2022
Main Objective: Improve 2 year old Immunization Rates

**Target for objective #5**

By June 2022, improve 2 year old Immunization Rates to 80% in Central Oregon.

**Objective #5: Progress**

*Please provide your progress on objective #5 (where you actually landed).*

*If you had four or less objectives in your original proposal, please type N/A.*
Although none of the counties achieved 80% under 2 Immunization rates by 2022, immunization rate for Jefferson county improved from 65% in 2018 to 71% by the end of 2021. Immunization rate for Deschutes county improved from 68% in 2018 to 71% by the end of 2021. Only Crook county had a drop in immunization rates from 68% in 2018 to 65% in 2021.

**Objective #5: Met or not met**

*Did you meet or exceed the target for objective #5?*

No, I did not meet the target for objective #5

**Objective #6**

Improve knowledge and awareness of the importance of vaccinations through the coordinated effort with BOOST and messaging.

**Target for objective #6**

*Original target for objective #6*

The target for this objective is to develop a coordinated campaign for vaccine awareness and promote using the same materials in the Central Oregon region by December 2019.

**Objective #6: Progress**

*Please provide your progress for objective #6 (where you actually landed).*

Boost Oregon was very much engaged in our vaccine efforts. They provided very helpful resources and language around vaccine hesitancy. Their engagement was instrumental in helping us message the importance of childhood vaccinations.

**Objective #6: Met or not met**

*Did you meet or exceed the target for objective #6?*

Yes, I met or exceeded the target for objective #6

**Objective #7**

**Target #7**

**Progress for objective #7**

*Please provide your progress for objective #7 (where you actually landed).*
**Objective #7: Met or not met**
*Did you meet or exceed the target for objective #7?*

N/A, my proposal contained six or less objectives

**Objective #8**

**Target #8**

**Target #8: Progress**
*Please provide your progress on objective #8 (where you actually landed).*

**Objective #8: Met or not met**
*Did you meet or exceed the target for objective #8?*

N/A, my proposal contained seven or less objectives

**Objective #9**

**Target #9**

**Objective #9: Progress**
*Please provide your progress on objective #9 (where you actually landed).*

**Objective #9: Met or not met**
*Did you meet or exceed the target for objective #9?*

N/A, my proposal contained eight or less objectives

**Additional analytical reports**
*Please attach any additional analytical reports or dashboards that you have associated with this project. You may attach up to 3. Files must be uploaded separately.*

**Additional analytical report 2**
*Please attach any additional analytical reports or dashboards that you have associated with this project.*
Additional analytical report 3

Please attach any additional analytical reports or dashboards that you have associated with this project.

Photos associated with project*

Please attach any photos you would like to share associated with your project. You may attach up to three. Photos must be uploaded separately under the 'photo attachment' headings below this question. Please indicate whether the Health Council may share and/or publish these photos publicly.

N/A: Please select this option ONLY if you did not share any photos.

Photo attachment #1

Please briefly describe the photo.

Photo attachment #2

Please briefly describe the photo.

Photo attachment #3

Please briefly describe the photo.

Behavioral Health Identification and Awareness*

How much impact did your project have on Behavioral Health: Identification and Awareness? 0 = no impact; 5 = maximum impact.

Max Score: 5

5

Behavioral Health Substance Use and Chronic Pain*

How much impact did your project have on Behavioral Health: Substance Use and Chronic Pain? 0 = no impact; 5 = maximum impact.

Max Score: 5

1

Cardiovascular Disease*

How much impact did your project have on Cardiovascular Disease? 0 = no impact; 5 = maximum impact.

Max Score: 5
Diabetes*
How much impact did your project have on Diabetes? 0 = no impact; 5 = maximum impact.
Max Score: 5

Oral Health*
How much impact did your project have on Oral Health?
0 = no impact; 5 = maximum impact.
Max Score: 5

Reproductive & Maternal Child Health*
How much impact did your project have on Reproductive & Maternal Child Health? 0 = no impact; 5 = maximum impact.
Max Score: 5

Milestones to Health and Education*
How much impact did your project have on Milestones to Health and Education? 0 = no impact; 5 = maximum impact.
Max Score: 5

Housing*
How much impact did your project have on Housing? 0 = no impact; 5 = maximum impact.
Max Score: 5

Education*
How much impact did your project have on education? 0 = no impact; 5 = maximum impact.
Max Score: 5
Physical activity*
How much impact did your project have on physical activity? 0 = no impact; 5 = maximum impact.
Max Score: 5

1

Equity, Social Connection & Civic Muscle*
How much impact did your project have on equity, social connection & civic muscle? 0 = no impact; 5 = maximum impact.
Max Score: 5

4

Jobs & Wealth*
How much impact did your project have on jobs & wealth? 0 = no impact; 5 = maximum impact
Max Score: 5

1

Preventative Services & Policies*
How much impact did your project have on preventative services & policies? 0 = no impact; 5 = maximum impact
Max Score: 5

5

Stable Housing*
How much impact did your project have on stable housing? 0 = no impact; 5 = maximum impact
Max Score: 5

0

Child Abuse Prevention*
How much impact did your project have on child abuse prevention? 0 = no impact; 5 = maximum impact
Max Score: 5

2
**Safe Neighborhoods***

*How much impact did your project have on safe neighborhoods? 0 = no impact; 5 = maximum impact*

*Max Score: 5*

2

**Nutritious Food***

*How much impact did your project have on nutritious food? 0 = no impact; 5 = maximum impact*

*Max Score: 5*

2

**Healthy Environment***

*How much impact did your project have on a healthy environment? 0 = no impact; 5 = maximum impact*

*Max Score: 5*

2

**Arts & Recreation***

*How much impact did your project have on arts & recreation? 0 = no impact; 5 = maximum impact*

*Max Score: 5*

2

**Mental Health Care***

*How much impact did your project have on mental health care? 0 = no impact; 5 = maximum impact*

*Max Score: 5*

3

**Other comments for final report**

*Is there anything else you would like us to know?*

We are very thankful for all of the support from COHC during this project. The COVID pandemic caused a lot of setbacks but COHC has been very understanding and supportive through all the challenges we encountered while implementing this project.
FollowUp Files

Applicant File Uploads

No files were uploaded
Please provide your current progress on this objective.

If your proposal only contains less than four objectives, please type N/A.

N/A

SMART Objective #5 (Target/Future State)

Objective #5: Progress*
Please provide your current progress on this objective.

If your proposal only contains less than five objectives, please type N/A.

N/A

SMART Objective #6 (Target/Future State)

Objective #6: Progress*
Please provide your current progress on this objective.

If your proposal only contains less than six objectives, please type N/A.

N/A

Annual report: Photos Associated with Project
Please attach any photos you would like to share associated with your project. You may attach up to three. Photos must be uploaded separately under the 'photo attachment' headings below this question. Please indicate whether the COHC may share and/or publish these photos publicly.

N/A: Please select this option ONLY if you did not share any photos

Annual Report: Photo Attachment #1
Please briefly describe the photo.

[Unanswered]

Annual Report: Photo Attachment #2
Please briefly describe the photo.

Annual Report: Photo Attachment #3
Please briefly describe the photo.

Additional Reports
If you have any additional dashboards or reports, you may attach the first one here.

This is optional.

Please note, you must attach files one at a time separately, for a maximum of three files.

If you have more than three files you would like to submit to the COHC, please reach out to the COHC staff.

Please provide a brief description of each document you are attaching.

File Upload/Report 2
If you have an additional report, you may attach it here. Please briefly describe the file you are uploading.

File Upload/Report 3
If you have an additional report, you may attach it here. Please briefly describe the file you are uploading.

Other Comments for Annual Report
Is there anything else you would like us to know?

On behalf of the students, families and staff of the Migrant Education program, we cannot thank COHC enough for the continued support. Many lives have been touched and impacted for the positive thanks to your help and partnership. We have been able to do a tremendous amount of work for our Migrant Community these past couple of years thanks to the numerous grant opportunities and support, our community has seen so much benefit and growth thanks to this!
FollowUp Files

Applicant File Uploads

No files were uploaded